PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
TOTAL CLAIMS			(Column	1)	(Column 2)		1	TYPE		OR	OR SMALL ENTITY		
TOTAL CLAIIVIS			25					RATE	FEE]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
то	TAL CHARGEA	BLE CLAIMS	25 minus 20=		*	5		X\$ 9=		OR	X\$18=	90	
	EPENDENT CL	*	/	nus 3 =	*	4	Ī	X40=		OR	X80=	320	
MULTIPLE DEPENDENT CLAIM PRESENT							Ī	+135=		OR	+270=		
* If the difference in column 1 is less than zero,					r "0" in d	column 2	L	TOTAL		OR	TOTAL	1120	
CLAIMS AS AMENDED - PART II							OTHER THAN						
_		(Column 1) CLAIMS		(Colu		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	* NTATION OF M	Minus	***	F OL AINA	=	ſ	X40=		OR	X80=		
<u> </u>	rinoi Phese	NTATION OF MI	ULTIPLE DEF	PENDEN	CLAIM		Ī	+135=		OR	+270=		
							L	TOTAL		OR	TOTAL		
		A	DDIT. FEE			ADDIT. FEE							
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colui HIGH NUM PREVIO PAID	IEST BER OUSLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .	١	X\$ 9=		OR	X\$18=		
	Independent	* NTATION OF MI	Minus	***	CLAIM	=	ſ	X40=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=		
										OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colur		(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		-	-	X40=		OR	X80=	1-	
	LINS! PRESE	NTATION OF M	'ENDEN	CLAIM	,	H							
	If the entry in colu	mn 1 is less than t	he entry in colu	mn 2 write	a "O" in co	lumn 3	L	+135=		OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
	The "Highest Num	nber Previously Pa	id For" (Total o	Independ	ent) is the	highest number	foun	d in the app	ropriate box	in col	umn 1.		